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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	See Attachment A
	Filing Date	See Attachment A
	First Named Inventor	See Attachment A
	Art Unit	See Attachment A
	Examiner Name	See Attachment A
	Attorney Docket Number	See Attachment A

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 75436☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:75436

OR

☐ Firm or
Individual Name Sean D. Detweiler, Esq.
Morse, Barnes-Brown & Pendleton, P.C.Address 1601 Trapelo Road
Suite 205City WalthamCountry USA

State

Massachusetts

Zip

02451Telephone (781) 622-5930

Email

sdetweiler@mbbp.com

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
*Statement under 37 CFR 3.73(a) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Steve A. Herweck, Chief Executive Officer

Date

6/15/10

Telephone

(603) 880-1433

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒

*Total of

1

forms are submitted.